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Attorney Docket No.: 111164.99

Date: November 21, 2001

**BOX REISSUE**

**REISSUE APPLICATION TRANSMITTAL  
LETTER AND FILING FEE**

10821 U.S. PTO  
09/989470

11/21/01

Customer Number: 25944

Director of the U.S. Patent and Trademark Office  
Washington, D.C. 20231

Sir:

Transmitted herewith is a Reissue Application of U.S. Patent No. 5,991,009, issued November 23, 1999, Serial No. 09/127,625.

For (Title): **ILLUMINATION OPTICAL APPARATUS USING DIFFERENT NUMBER OF LIGHT SOURCES UNDER DIFFERENT EXPOSURE MODES, METHOD OF OPERATING AND METHOD OF MANUFACTURING THEREOF**

By (Inventors): **Kenji NISHI and Naomasa SHIRAISHI**

- ☐ A Reissue Declaration (executed by the inventor(s)) is filed herewith.  
☐ A Consent of Assignee to Reissue is filed herewith.  
☐ A Request for Transfer of Patent Drawings is filed herewith.  
☐ An Information Disclosure Statement is filed herewith.  
☒ A Claim for Priority is filed herewith.  
☐ A Preliminary Amendment is filed herewith. Claims added by this Amendment are properly numbered consecutively beginning with the number next following the highest numbered claim in the application.  
☐ Entitlement to small entity status is hereby asserted.  
☒ The filing fee has been calculated as shown below:

**CLAIMS IN THE APPLICATION AFTER ENTRY OF  
ANY PRELIMINARY AMENDMENT NOTED ABOVE**

FOR:	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	37 - 31 *	= 6
INDEP CLAIMS	8 - 3 **	= 5
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS PRESENTED		

**SMALL ENTITY**

RATE	FEE
	\$ 370
x 9 =	\$
x 42 =	\$
+140 =	\$
TOTAL	\$

**OTHER THAN A  
SMALL ENTITY**

RATE	FEE
	\$ 740
x 18	\$ 108
x 84	\$ 420
+ 280	\$
TOTAL	\$1,268

- \* Number of claims in original patent  
\*\* Number of independent claims in original patent  
\*\*\* If the difference is less than zero, enter "0".

- ☒ Check No. 125133 in the amount of \$1,268.00 to cover the filing fee is attached. Except as otherwise noted herein, the Director is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

*James A. Oliff*

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